



Written Warning

Lake County Board of County Commissioners

Corrective Action Form

This form can be used to document a Corrective Action - Written Warning. Forward the completed Corrective Action Form to the Office of Employee Services to be retained in the employee's personnel file.

Section I – Employee Information

| | | |
|------------------|----------------|-----------------------------------|
| Name of Employee | Department | Job Title |
| | | |
| Employee Number | Date of Record | Date of Offense(s), If applicable |
| | | |

Employees are expected to be productive while at work, and maintain ethical, behavioral and performance standards as outlined in the County's Policies and Procedures. When necessary, corrective action will be taken to maintain such standards. The County's progressive corrective action may include an Oral Warning, Written Warning, Suspension without Pay, Demotion, or Termination.

Section II – Written Warning

Reason for Written Warning: Describe the reason for the Written Warning: Be specific – indicate date(s), time(s), describe incident(s) in detail, name witness, etc. (Attach a copy of all supporting documents.)

Cite Violations of County Policies and Procedures, including Sections and Sub-Sections:

Corrective Action(s) to be taken and Date(s) by when such action should be completed: Corrective Action(s) is/are taken because of the seriousness of the situation, and to inform you that the County will not tolerate such standards of performance and/or conduct. You are hereby advised that the following corrective action(s) and deadline(s) are expected to be accomplished.

Employee Comment(s) (If no comments please indicate):

Section III – Signatures

I understand that my signature does not necessarily mean that I agree with this Written Warning, it is just an acknowledgment of receipt.

Employee Signature

Date

Administering Supervisor (print)

Supervisor Signature

Date

Division Director Signature (If applicable)

Date

Department Director Signature

Date